TOWLE & CO.

IRA DISTRIBUTION REQUEST

IRA Trustee's or Custodian's Name and Address:

Regular Mail Delivery

Towle & Co PO Box 2175

Milwaukee, WI 53201-2175

Overnight Delivery
Towle & Co
c/o UMB Fund Services, Inc
235 W Galena Street

Milwaukee, WI 53212

The IRA Distribution Request is used by IRA owners and Inherited IRA owners to request a distribution from a Traditional, Roth, SEP, or SIMPLE IRA.

PA	RT I: IRA OWNER INFORMATION					
Name:		Taxpayer ID Number:	Date of Birth:			
Primary Phone:		Email Address:				
IRA	Account/Plan Number:					
	RT II: DISTRIBUTION TYPE					
	Required Minimum Distribution: Unless otherwise indicated below, the RMD will be calculated using the Uniform Lifetime Expectancy table. (Choose one):					
	$\ \square$ My spouse is my sole beneficiary and greater than 10 years y	ounger than me. Calculate my RMD usi	ng the Join-Life Expectancy table.			
	☐ Please only send me the amount in Section III.					
	Qualified charitable distribution (Generally cannot be made from SEP or SIMPLE IRAs if the account owner's employer is currently maintaining the SEP or SIMPLE IRA plan. IRA owner/Inherited IRA owner must be age 70½ or older on date of the distribution. Medallion Signature Guarantee required to send to a payee other than the shareholder's address or bank of record. See Section VIII.) Name of Charity:					
	Normal Distribution: Distribution to IRA owner age 59½ or old	der				
	Premature Distribution: Distribution to IRA owner under the age of 59½					
	☐ Distribution to Inherited IRA owner following death of IRA owner					
☐ Single Life Expectancy Payments: I elect to deplete the account balance by taking payments over my single life. Please ca Required Minimum Distribution.						
	$\ \square$ Please only send me the amount in Section III.					
	Disability as defined under Internal Revenue Code Sec. 72(m from the Social Security Administration.	a)(7). Enclose a statement on doctor's le	tterhead or certification of disability			
	Substantially equal periodic payments: Distributions are to be Lifetime Expectancy table to calculate your payments unless you	<u> </u>	E			
	Direct Conversion to a Roth IRA from a Traditional or SEP complete an IRA application.	IRA: If you do not currently have a Ro	h IRA with Towle & Co, please			
	Return of excess contribution with earnings. Excess contribute Excess Contribution Amount: \$	·				
	☐ Redeem and issue a check, ACH or wire payment for excess of	contributions and earnings.				
	☐ Remove the excess contribution and earnings and reapply as a than, the maximum contribution for the calendar year). If the disamount over the contribution limit to the IRA owner.					
	$\hfill\square$ Remove excess contribution and earnings and invest in the Te	owle & Co account listed in Section IV.				
	Revocation: The date the IRA is established is considered the date (Please note: An IRA can only be revoked within 7 days of open	1 , 5 5	v, you elect to revoke your IRA.			

PA	RT III: DISTRIBUTION AMOUNT/FREQUENCY (Select One)		
	NE TIME DISTRIBUTION		
	I wish to withdraw my entire account balance. Please list the fund(s) are	nd account number(s) below.	
	I wish to make a one-time, partial withdrawal of \$ F	Please list the fund(s) and accou	nt number(s) below.
	I wish to withdraw the requested amount from my investments as indic	ated below.	
	Special instructions: I wish to take the RMD for my entire account <u>ON</u> Please list the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund to the percentage of RMD to come from each fund to the percentage of RMD to come from the percentage of RMD to come f		nt number(s) listed below.
Fun	nd Name/Account Number		Amount \$
Fun	nd Name/Account Number		Amount \$
Fun	nd Name/Account Number		Amount \$
	A maintenance fee of \$15 will be charged on all fund accounts where a Maintenance Fee. If the fee applies it will be deducted from the proceed Fee payment options (select only one):		
	$\hfill\Box$ Please deduct the \$15 maintenance fee from the proceeds of my distr	ibution.	
	$\hfill\Box$ Please do not deduct the \$15 maintenance fee from the proceeds of n	ny distribution. I have enclosed	a check made payable to Towle & Co.
	CRIODIC DISTRIBUTION-SYSTEMATIC WITHDRA ch payments will continue indefinitely until canceled)	WL REQUEST	
	I wish to set up systematic withdrawals to be withdrawn as indicated be	elow.	
	Special instructions: I wish to take the RMD for my entire account <u>ON</u> Please list the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from each fund(s) and according to the percentage of RMD to come from the percentage of		nt(s) listed below.
Fun	nd Name/Account Number		Amount \$
	☐ Monthly ☐ Quarterly ☐ Semi-Annually	☐ Annually	
	\Box 5 th or \Box 20 th of the month, beginning the month of:	, 20	
Fun	nd Name/Account Number		Amount \$
	☐ Monthly ☐ Quarterly ☐ Semi-Annually	☐ Annually	
	\square 5 th or \square 20 th of the month, beginning the month of:	, 20	
Fun	nd Name/Account Number		Amount \$
	☐ Monthly ☐ Quarterly ☐ Semi-Annually	☐ Annually	
	\Box 5 th or \Box 20 th of the month, beginning the month of:	, 20	
PA	RT IV: PAYMENT METHOD		
	Mail check to the address currently on file.		
	Deposit to my existing non-IRA account number, including the fund nu	ımber:	
C-60	Deposit to a new non-IRA account. (If you do not currently have a non with this form). *If your existing or new non-IRA account is registered to a name other Guarantee is required. (See Section VIII). 6 IRA Distribution Request (07/2023)	than your name only (e.g., join	

□ P	lease send a check to a different addres	s (requires Medallion Signatu	re Guarantee. Se	e Section VIII).	
Name					
Street	Address	City		State	Zip
□ P	lease send my distribution to the bank	isted on my account via:			
	Electronic Funds Transfer (2-3 bus	ness days; no fee)			
	Wire (1 business day; \$20)				
	☐ Please charge the \$20 fee to the	account			
	☐ Please do not charge the \$20 fee	to the account. I have enclose	ed a check for \$2	0 made payable to Towle	& Co
□ P	lease send my distribution to the bank	account listed below (requires	Medallion Signa	ature Guarantee. See Secti	on VIII):
	Electronic Funds Transfer (2-3 bus	ness days; no fee)			
	Wire (1 business day; \$20)				
	☐ Please charge the \$20 fee to the	account			
□ Ple	ase do not charge the \$20 fee to the acc		for \$20 made pa	ayable to Towle & Co	
			•	•	
P	lease attach a blank, voided check fr	om your bank account to thi	s torm.		
Bank l	Name			Name(s) on Bank	Account
Bank A	Address	_	City	State	Zip
Routin	g Number	-	A	ccount Number	
Accou	nt Type:	Would you like	this bank inform	nation to be added to your	account?
	☐ Checking Account ☐ Savings Acc	count	es 🗆 No		
PART	TV: WITHHOLDING NOTICE A	ND ELECTION (FORM W-4F	R/OMB No. 1545-0	0074) Dept. of Treasury.	INTERNAL REVENUE SERVICE
Tax w distrik	ithholding does not apply to transfer outions, revocations, recharacterizati	s, direct rollovers to employ	er plans, qualifi	ied charitable distributio	ons, qualified HSA funding
	e 1 (Recipient Information) First name and middle initial:		Last Name:		
	Social Security Number:		1.770	G 1	
		City or town			the default withholding rate is
10%. for p	federal tax withholding rate is determined a federal tax with tax	e by entering a rate between 0	% and 100% on	line 2 (below). Generally,	, you can't choose less than 10%
	e 2 plete this line if you would like a rate of Tables (below) for additional informat				
	: Unless a previous federal income tax tee/Custodian will withhold federal inc				
Plea	se see Part VI for options for state inco	me tax withholding.			

PART VI: STATE INCOME TAX WITHHOLDING ELECTION

Your payor cannot withhold an amount less than the required minimum for your state. If no election is made, the minimum withholding will be taken based on your state of residence on record with your payer.

Mandatory states that state withholding can be processed are Arkansas, California, Connecticut, Delaware, District of Columbia, Iowa, Kansas, Maine, Massachusetts, Michigan, Minnesota, Nebraska, North Carolina, and Vermont					
I file a state tax return with the state of					
(Select one)					
☐ Do not withhold state income tax, ur	ıless required.				
☐ Withhold state Income Tax of	%				
☐ Withhold State Income Tax of \$					
PART VII: ACKNOWLEDGEMENT	Γ				
By signing this <i>IRA Distribution Request</i> , I certify that the information I have provided is true and correct, and I authorize the Trustee/Custodian to distribute my IRA as instructed above. I understand that I am responsible for ensuring I am eligible to authorize this distribution and I assume all responsibility for any consequences resulting from my actions. I will indemnify and hold the Trustee/Custodian harmless from any consequences related to executing my instructions, including payments made in error. I have been advised to seek competent legal and tax advice and have not been provided any such advice from the Trustee/Custodian. If this distribution involves a SIMPLE IRA, special rules apply, and I assume responsibility for my actions regarding those issues. I understand that if this is qualified charitable distribution (QCD) or HSA funding distribution, I certify that I understand the requirements for making such a distribution from my IRA and that I meet such requirements.					
Signature of IRA owner/Inherited IRA ov	vner (or other authorized person)	Date			
PART VIII: MEDALLION SIG	NATURE GUARANTEE				
		ank account other than those listed on your account, if the RA account which is registered to a name other than your			
A Medallion signature guarantee may be obtained from a member of a national securities exchange, a U.S. commercial bank, trust company or federally chartered savings and loan or another eligible guarantor institution. A notary public is not an acceptable guarantor.					
	(Stamp Here)				
Medallion signature guarantee (if required)					

2024 Marginal Rate Tables

You may use these tables to help you select the appropriate withholding rate for this payment or distribution. Add your income from all sources and use the column that matches your filing status to find the corresponding rate of withholding. See "Suggestion for determining withholding" below for more information on how to use this table.

Single or Married filing separately		Married filing jointly or Qualifying widow(er)		Head of household	
Total income	Tax rate for every dollar more	Total income	Tax rate for every dollar more	Total income	Tax rate for every dollar more
over—		over—		over—	
\$0	0%	\$0	0%	\$0	0%
14,600	10%	29,200	10%	21,900	10%
26,200	12%	52,400	12%	38,450	12%
61,750	22%	123,500	22%	85,000	22%
115,125	24%	230,250	24%	122,400	24%
206,550	32%	413,100	32%	213.850	32%
258,325	35%	516,650	35%	265,600	35%
623,950*	37%	760,400	37%	631,250	37%
*If married filing separately, use \$380,200 instead for this 37% rate.					

General Instructions

Section references are to the Internal Revenue Code.

Future developments. For the latest information about any future developments related to Form W-4R, such as legislation enacted after it was published, go to *www.irs.gov/FormW4R*.

Purpose of form. Complete Form W-4R to have payers withhold the correct amount of federal income tax from your nonperiodic payment from your individual retirement arrangement (IRA). See below for the rules and options for the payment. For more information on withholding, see Pub. 505, *Tax Withholding and Estimated Tax*.

Caution: If you have too little tax withheld, you will generally owe tax when you file your tax return and may owe a penalty unless you make timely payments of estimated tax. If too much tax is withheld, you will generally be due a refund when you file your tax return. Your withholding choice (or an election not to have withholding on a nonperiodic payment) will generally apply to any future payment from the same plan or IRA. Submit a new Form W-4R if you want to change your election.

Nonperiodic payments—10% withholding. Your payer must withhold at a default 10% rate from the taxable amount of nonperiodic payments unless you enter a different rate on Line 2 of this withholding certificate. Distributions from an IRA that are payable on demand are treated as nonperiodic payments. Note that the default rate of withholding may not be appropriate for your tax situation. You may choose to have no federal income tax withheld by entering "-0-" on Line 2 of this withholding certificate. See the specific instructions below for more information. Generally, you are not permitted to elect to have federal income tax withheld at a rate of less than 10% (including "-0-") on any payments to be delivered outside the United States and its territories.

Note: If you don't give Form W-4R to your payer, you don't provide an SSN, or the IRS notifies the payer that you gave an incorrect SSN, then the payer must withhold 10% of the payment for federal income tax and can't honor requests to have a lower (or no) amount withheld. Generally, for payments that began before 2024, your current withholding election (or your default rate) remains in effect unless you submit a Form W-4R.

Payments to nonresident aliens and foreign estates. Do not use Form W-4R. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for more information.

Specific Instructions Line 1b

For an estate, enter the estate's employer identification number (EIN) in the area reserved for "Social security number."

Line 2

More withholding. If you want more than the default rate withheld from your payment, you may enter a higher rate on Line 2 of this withholding certificate.

Less withholding. If permitted, you may enter a lower rate on Line 2 of this withholding certificate (including "-0-") if you want less than the 10% default rate withheld from your payment. If you have already paid, or plan to pay, your tax on this payment through other withholding or estimated tax payments, you may want to enter "-0-". C-606 IRA Distribution Request (07/2023)

Suggestion for determining withholding. Consider using the Marginal Rate Tables (above) to help you select the appropriate withholding rate for this payment or distribution. The tables are most accurate if the appropriate amount of tax on all other sources of income, deductions, and credits has been paid through other withholding or estimated tax payments. If the appropriate amount of tax on those sources of income has not been paid through other withholding or estimated tax payments, you can pay that tax through withholding on this payment by entering a rate that is greater than the rate in the Marginal Rate Tables.

The marginal tax rate is the rate of tax on each additional dollar of income you receive above a particular amount of income. You can use the table for your filing status as a guide to find a rate of withholding for amounts above the total income level in the table. To determine the appropriate rate of withholding from the table, do the following. Step 1: Find the rate that corresponds with your total income not including the payment. Step 2: Add your total income and the taxable amount of the payment and find the corresponding rate. If these two rates are the same, enter that rate on Line 2 of this withholding certificate. (See Example 1 below.)

If the two rates differ, multiply (a) the amount in the lower rate bracket by the rate for that bracket, and (b) the amount in the higher rate bracket by the rate for that bracket. Add these two numbers; this is the expected tax for this payment. To get the rate to have withheld, divide this amount by the taxable amount of the payment. Round up to the next whole number and enter that rate on Line 2 of this withholding certificate. (See Example 2 below.)

If you prefer a simpler approach (but one that may lead to overwithholding), find the rate that corresponds to your total income including the payment and enter that rate on Line 2 of this withholding certificate.

Examples. Assume the following facts for Examples 1 and 2. Your filing status is single. You expect the taxable amount of your payment to be \$20,000. Appropriate amounts have been withheld for all other sources of income and any deductions or credits.

Example 1. You expect your total income to be \$62,000 without the payment. Step 1: Because your total income without the payment, \$62,000, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$82,000, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. Because these two rates are the same, enter "22" on Line 2 of this withholding certificate.

Example 2. You expect your total income to be \$43,700 without the payment. Step 1: Because your total income without the payment, \$43,700, is greater than \$26,200 but less than \$61,750, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$63,700, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. The two rates differ. \$18,050 of the \$20,000 payment is in the lower bracket (\$61,750 less your total income of \$43,700 without the payment), and \$1,950 is in the higher bracket (\$20,000 less the \$18,050 that is in the lower bracket). Multiply \$18,050 by 12% to get \$2,166. Multiply \$1,950 by 22% to get \$429. The sum of these two amounts is \$2,595. This is the estimated tax on your payment. This amount corresponds to 13% of

the \$20,000 payment (\$2,595 divided by \$20,000). Enter "13" on Line 2 of this withholding certificate.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to provide this information only if you want to (a) request additional federal income tax withholding from your nonperiodic payment(s); (b) choose not to have federal income tax withheld from your nonperiodic payment(s), when permitted; or (c) change a previous Form W-4R (or a previous Form W-4P that you completed with respect to your nonperiodic payments). To do any of the aforementioned, you are required by sections 3405(e) and 6109 and their regulations to provide the information requested on this form. Failure to provide this information may result in inaccurate withholding on your payment(s). Failure to provide a properly completed form will result in your payment(s) being subject to the default rate; providing fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.to the next whole number and enter that rate on line 2. (See *Example 2* below.)

If you prefer a simpler approach (but one that may lead to overwithholding), find the rate that corresponds to your total income including the payment and enter that rate on line 2.

Examples. Assume the following facts for *Examples 1* and 2. Your filing status is single. You expect the taxable amount of your payment to be \$20,000. Appropriate amounts have been withheld for all other sources of income and any deductions or credits. *Example 1.* You expect your total income to be \$60,000 without the payment. Step 1: Because your total income without the payment, \$60,000, is greater than \$58,575 but less than \$109,225, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$80,000, is greater than \$58,575 but less than \$109,225,

the corresponding rate is 22%. Because these two rates are the same, enter "22" on line 2.

Example 2. You expect your total income to be \$42,500 without the payment. Step 1: Because your total income without the payment, \$42,500, is greater than \$24,850 but less than \$58,575, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$62,500, is greater than \$58,575 but less than \$109,225, the corresponding rate is 22%. The two rates differ. \$16,075 of the \$20,000 payment is in the lower bracket (\$58,575 less your total income of \$42,500 without the payment), and \$3,925 is in the higher bracket (\$20,000 less the \$16,075 that is in the lower bracket). Multiply \$16,075 by 12% to get \$1,929. Multiply \$3,925 by 22% to get \$863.50. The sum of these two amounts is \$2,792.50. This is the estimated tax on your payment. This amount corresponds to 14% of the \$20,000 payment (\$2,792.50 divided by \$20,000). Enter "14" on line 2.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to provide this information only if you want to (a) request additional federal income tax withholding from your nonperiodic payment(s) or eligible rollover distribution(s); (b) choose not to have federal income tax withheld from your nonperiodic payment(s), when permitted; or (c) change a previous Form W-4R (or a previous Form W-4P that you completed with respect to your nonperiodic payments or eligible rollover distributions). To do any of the aforementioned, you are required by sections 3405(e) and 6109 and their regulations to provide the information requested on this form. Failure to provide this information may result in inaccurate withholding on your payment(s). Failure to provide a properly completed form will result in your payment(s) being subject to the default rate; providing fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.